BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION REC
--

Effective October 1, 2001

Application	n or Docke	t Number
10	059	934
100	500	1351'

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			O D	OTHER	
TOTAL CLAIMS		50		(Goldinii 2)			RATE FEE		OR 7	RATE FEE		
FOR		NUMBER FILED		NI IMP	ER EXTRA		BASIC FEE	 	1			
					NONIB	ENEXINA		DASIC FEE	370.00	OR	BASIC PEE	740.00
TOTAL CHARGEABLE CLAIMS			minus 20=		30			X\$ 9=		OR	X\$18=	540
\vdash	DEPENDENT C		minus 3 =		12			X42=		OR	X84=	1008
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	2786	
7-26-05 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	.12	Minus	- 5	0	-	X\$ 9=			OR	X\$18=	
AME	Independent	NTATION OF MI	Minus	PENDENT	CLAIM	-		X42=		OR	X84=	
	1			LIIOCIII	00 4.11	!		+140=.		OR	+280=	
	× = ==						A	TOTAL ODIT. FEE		OR	TOTAL ADDIT, FEE	
_		(Column 1)		(Colur		(Column 3)			. 124.	-		
AMENDMENT'B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON NON	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF MU	Minus	***	CI AIA	-		X42=		OR	X84=	
_	TIMOT PRESE	NATION OF MIC	LIPLE DEF	ENDENT	COAIM			+140=		OR	+280=	
							L	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colun	nn 2)	(Column 3)				7 10	WORL PECE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ž	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	7
ME	Independent	•	Minus	***		8		X42=			X84=	
	FIRST PRESE	NTATION OF ML	JLTIPLE DEI	PENDENT	CLAIM		┞		241	OR	7.072	
• 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+140= TOTAL		OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
FORM PTO-975 /Pag 8/011												